Case 18-35197-KRH Doc 1 Filed 10/16/18 Entered 10/16/18 17:41:13 Desc Main Document Page 1 of 57

Fill in this information to identify your case:	Il in this information to identify your case:						
United States Bankruptcy Court for the:							
EASTERN DISTRICT OF VIRGINIA							
Case number (if known)	Chapter you are filing under:						
	■ Chapter 7						
	☐ Chapter 11						
	☐ Chapter 12						
	☐ Chapter 13	☐ Check if this an amended filing					

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself			
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name			
	Write the name that is on	Charmin		
	your government-issued picture identification (for	First name	_	First name
	example, your driver's	G		
	license or passport).	Middle name		Middle name
	Bring your picture	Clarence		
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)
	Ü			
2.	All other names you have used in the last 8 years			
	Include your married or maiden names.			
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1256		

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Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs			
5.	Where you live	6919 Autumn Point Dr	If Debtor 2 lives at a different address:			
		Richmond, VA 23234 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Chesterfield County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		PO Box 38005 Richmond, VA 23231				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Case number (if known)

7.	The chapter of the Bankruptcy Code you are				of each, see Notice Required by page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.					
	choosing to file under	■ CI	hapter 7								
			hapter 11								
			hapter 12								
			hapter 13								
3.	How you will pay the fee		about how yo	ou may pay. Typ attorney is subr	ically, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or money alf, your attorney may pay with a credit card or check with					
					the fee in installments. If you choose this option, sign and attach the Application for Individuals to be in Installments (Official Form 103A). It my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge to						
			I request that	at my fee be wa	ived (You may request this option	n only if you are filing for Chapter 7. By law, a judge may, ur income is less than 150% of the official poverty line tha					
			applies to yo	ur family size an	d you are unable to pay the fee in	n installments). If you choose this option, you must fill out oial Form 103B) and file it with your petition.					
).	Have you filed for bankruptcy within the last 8 years?	■ No	-								
	·		District		When	Case number					
			District		When	Case number					
			District		When	Case number					
0.	Are any bankruptcy	■ No	<u> </u>								
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye									
			Debtor			Relationship to you					
			District		When	Case number, if known					
			Debtor			Relationship to you					
			District		When	Case number, if known					
11.	Do you rent your	□ No	Go to	line 12.							
	residence?	■ Ye	es. Has yo	our landlord obta	nined an eviction judgment agains	t you?					
				No. Go to line	12.						
				Yes. Fill out Ind		Judgment Against You (Form 101A) and file it with this					

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		Document	Pa	ige 4 of 57	1

Case number (if known)

3: Report About Any Bu	sinesses	You Owr	n as a Sole Proprietor				
Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
	☐ Yes.	Name	e and location of business				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such		Name	Name of business, if any				
partnership, or LLC.							
If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State & ZIP Code				
it to this petition.		Chec	k the appropriate box to describe your business:				
			Health Care Business (as defined in 11 U.S.C. § 101(27A))				
			Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))				
			Stockbroker (as defined in 11 U.S.C. § 101(53A))				
			Commodity Broker (as defined in 11 U.S.C. § 101(6))				
			None of the above				
Chapter 11 of the							
For a definition of small	■ No.	I am ı	not filing under Chapter 11.				
business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.					
	☐ Yes.	I am f	filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any Property That Needs Immediate Attention				
	■ No.						
alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?				
public health or safety? Or do you own any			diate attention is				
immediate attention?		needed,	, why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?				
- ,			Number, Street, City, State & Zip Code				
	Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). 4: Report if You Own or Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed,	Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Yes. A: Report if You Own or Have Any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). Are pour own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own or hove any property that needs immediate attention? A sole proprietorship is a busines a corporation, partnership, or LLC. If you are filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under deadlines. If you in operations, cash-fin 11 U.S.C. 11160 No. I am for code I was any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? What is immediate attention?				

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Debtor 1 **Charmin G Clarence** Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

П

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor	2	(Spouse	Onl	y i	n a 、	Joi	int	Case
--------------	---	---------	-----	-----	-------	-----	-----	------

You must check one:

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

> I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Den	Charmin G Claren								
Par	6: Answer These Questi	ons for Re	porting Purposes						
16.	What kind of debts do you have?		individual primarily for a person	sumer debts? Consumer debts are defir al, family, or household purpose."	ned in 11 U.S.C. § 101(8) as "incurred by an				
			□ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.		ness debts? Business debts are debts t nent or through the operation of the busi					
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts you owe	that are not consumer debts or busines:	s debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	Go to line 18.					
	Do you estimate that after any exempt property is excluded and	Yes.		you estimate that after any exempt properties to distribute to unsecured creditors?	erty is excluded and administrative expenses				
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes						
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	□ 50-99		5 001-10,000	5 0,001-100,000				
		☐ 100-19 ☐ 200-99		□ 10,001-25,000	☐ More than100,000				
19.	How much do you estimate your assets to	S \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	be worth?		1 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion				
			01 - \$500,000 01 - \$1 million	☐ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you	□ \$0 - \$5	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	\$50,00	01 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion				
			01 - \$500,000	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
	<u></u>	□ \$500,0	01 - \$1 million	— \$100,000,001 - \$500 Hillion	- Word than 400 billion				
Par	37: Sign Below								
For	you	I have exa	amined this petition, and I declar	e under penalty of perjury that the inform	nation provided is true and correct.				
				am aware that I may proceed, if eligible, of available under each chapter, and I ch	under Chapter 7, 11,12, or 13 of title 11, oose to proceed under Chapter 7.				
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
		Charmir	min G Clarence G Clarence of Debtor 1	Signature of Debtor	2				
		Executed	on October 15, 2018	Executed on					
			MM / DD / YYYY		/ DD / YYYY				

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Debtor 1 Charmin G Clarence

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Michael A. Riedel	Date	October 15, 2018					
Signature of Attorney for Debtor		MM / DD / YYYY					
Michael A. Riedel							
Printed name							
Michael A. Riedel, Attorney at Law							
Firm name	Firm name						
208 1/2 North 23rd Street							
Richmond, VA 23223							
Number, Street, City, State & ZIP Code							
Contact phone 804-343-1112	Email address	mriedelpc@aol.com					
20215 VA							
Bar number & State							

Certificate Number: 15725-VAE-CC-031752566



CERTIFICATE OF COUNSELING

I CERTIFY that on October 12, 2018, at 4:03 o'clock PM EDT, Charmin Clarence received from 001 Debtorce, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Eastern District of Virginia, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	October 12, 2018	By:	/s/Melissa James
		Name:	Melissa James
		Title:	Counselor

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

			Docume	ent Page 9 of 57		10/16/18 11:22AM
Fill	in this inforn	nation to identify your	case:			
Deb	otor 1	Charmin G Clarer				
Deb	otor 2	First Name	Middle Name	Last Name		
	use if, filing)	First Name	Middle Name	Last Name		
Unit	ed States Ba	nkruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Cas	e number					
(if kno	own)				_	t if this is an ded filing
					amon	aca ming
Off	ficial Fo	rm 106Sum				
			and Liabilities an	nd Certain Statistical Informatio	<u>n</u>	12/15
				are filing together, both are equally responsible information on this form. If you are filing amount		
				the box at the top of this page.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	ioo uno. you iiio
Part	1: Summ	arize Your Assets				
					Your a	ssets
					Value o	of what you own
1.	Schedule A 1a. Copy line	/B: Property (Official Fore 55, Total real estate, for	orm 106A/B) rom Schedule A/B		\$	0.00
	1b. Copy line	e 62, Total personal pro	perty, from Schedule A/B		\$	10,577.00
	1c. Copy line	e 63, Total of all property	y on Schedule A/B		\$	10,577.00
Part	2: Summ	arize Your Liabilities				
						abilities
					Amoun	t you owe
2.			laims Secured by Property mn A, Amount of claim, at t	(Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D</i>	o \$	14,615.00
3.			Unsecured Claims (Official 1) (priority unsecured claim	I Form 106E/F) s) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy th	e total claims from Part	2 (nonpriority unsecured cl	laims) from line 6j of Schedule E/F	\$	35,596.00
				Your total liabilit	ies \$	50,211.00
Part	3: Summ	arize Your Income and	Expenses			
4.	Schedule I:	Your Income (Official Fo	orm 106I)			2 222 27
	Copy your c	ombined monthly incom	e from line 12 of Schedule	<i>I</i>	\$	2,893.37
5.	Schedule J: Copy your m	Your Expenses (Official nonthly expenses from li	Form 106J) ne 22c of <i>Schedule J</i>		\$	2,974.00
Part	4: Answe	er These Questions for	Administrative and Stati	stical Records		
6.	•	•	er Chapters 7, 11, or 13? on this part of the form. Cl	heck this box and submit this form to the court with	ı your other sch	nedules.
	■ Yes					

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Charmin G Clarence

Case number (if known)

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$	3,255.76
		i —	

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	lotai	ciaim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	3,639.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	3,639.00

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10/1	6/18	11:22AM

		Document	raye II 0131		
Fill in this infor	rmation to identify your case	and this filing:			
Debtor 1	Charmin G Clarence				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the: EAS	STERN DISTRICT OF VIRG	SINIA		
0					
Case number					☐ Check if this is an amended filing
Official Fo	orm 106A/B				
-	le A/B: Proper	tv			12/15
In each category, think it fits best.	separately list and describe item Be as complete and accurate as re space is needed, attach a sep	ns. List an asset only once. It possible. If two married peop	ole are filing together, both a	re equally responsible for su	the category where you oplying correct
Part 1: Describe	e Each Residence, Building, Lan	d, or Other Real Estate You C	own or Have an Interest In		
1. Do you own or	have any legal or equitable inter	est in any residence, buildin	g, land, or similar property?		
■ No. Go to Pa	ort 2				
Yes. Where					
Part 2: Describe	e Your Vehicles				
	ase, or have legal or equitablives. If you lease a vehicle, als				hicles you own that
	,	·	executory Contracts and C	похриса Есазоз.	
3. Cars, vans, t	rucks, tractors, sport utility v	ehicles, motorcycles			
□ No					
Yes					
	Buick			Do not deduct secured cla	ims or exemptions. Put
3.1 Make: Model:	Verano	Who has an interest in to Debtor 1 only	The property? Check one	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
Year:	2013	Debtor 2 only		Current value of the	Current value of the
Approxima	ate mileage: 94100	Debtor 1 and Debtor 2	2 only	entire property?	portion you own?
Other info	rmation:	At least one of the del	otors and another		
		Check if this is come (see instructions)	munity property	\$8,000.00	\$8,000.00
	ircraft, motor homes, ATVs a ats, trailers, motors, personal v				
■ No					
☐ Yes					
	lar value of the portion you o nave attached for Part 2. Writ				\$8,000.00
	e Your Personal and Household				
Do you own or	have any legal or equitable	interest in any of the follo	wing items?	ŗ C	Current value of the cortion you own? On not deduct secured laims or exemptions.
	oods and furnishings lajor appliances, furniture, liner	ns, china, kitchenware			

Official Form 106A/B Schedule A/B: Property

C	Case 18-351	197-KRH Do	c 1 Filed 10/1 Document		ntered 10/16/1 12 of 57	.8 17:41:13	Desc Main 10/16/18 11:22
Debtor 1	Charmin G (Clarence				mber (if known)	
■ Yes.	Describe						
		household furnis	shings				\$1,000.00
□ No	les: Televisions a	and radios; audio, vide I phones, cameras, me		juipment; con	nputers, printers, scal	nners; music coll	ections; electronic devices
		2 televisions \$20	00; 1 cell phone \$10	0: tablet \$5	60		\$350.00
		1 101011010110 \$20	50, 1 0011 p110110 \$10	σ, ιασίσι φο			
Example ■ No		l figurines; paintings, p ons, memorabilia, coll		books, picture	es, or other art object	s; stamp, coin, o	r baseball card collections;
Example No	nent for sports a les: Sports, photo musical instr	ographic, exercise, and	d other hobby equipmer	nt; bicycles, p	ool tables, golf clubs,	, skis; canoes an	d kayaks; carpentry tools;
■ No		s, shotguns, ammuniti	ion, and related equipm	ent			
□ No		othes, furs, leather co	ats, designer wear, sho	es, accessori	es		
		wearing apparel					\$300.00
■ No		welry, costume jewelr	y, engagement rings, w	edding rings,	heirloom jewelry, wa	tches, gems, gol	d, silver
	arm animals ples: Dogs, cats,	birds, horses					
☐ Yes.	Describe						
14. Any ot ■ No	ther personal an	d household items y	ou did not already lis	t, including a	any health aids you	did not list	
☐ Yes.	Give specific inf	formation					
			from Part 3, including			e attached	\$1,650.00
	escribe Your Finan						
Do you ov	wn or have any l	egal or equitable into	erest in any of the foll	owin <mark>g?</mark>			Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

Page 13 of 57 Document Debtor 1 **Charmin G Clarence** Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$50.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... Henrico Federal Credit Union, Richmond, VA \$21.00 17.1. checking Skylight paycard \$4.00 17.2. paycard 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ☐ No Yes. List each account separately. Type of account: Institution name: 401(k) **BKD Employee Retirement Savings** \$850.00 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

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Case 18-35197-KRH

Doc 1

Case 18-35197-KRH Doc 1 Filed 10/16/18 Entered 10/16/18 17:41:13 Desc Main Page 14 of 57 10/16/18 11:22AM Document Debtor 1 **Charmin G Clarence** Case number (if known) 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No ■ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... income tax refund \$1.00 **Federal** income tax refund Virginia \$1.00 Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value:

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

☐ Yes. Give specific information..

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

☐ Yes. Describe each claim.......

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

■ No

Official Form 106A/B Schedule A/B: Property page 4

Case 18-35197-KRH Doc 1 Filed 10/16/18 Entered 10/16/18 17:41:13 Desc Main Page 15 of 57 Document Debtor 1 **Charmin G Clarence** Case number (if known) ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$927.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$8,000.00 57. Part 3: Total personal and household items, line 15 \$1,650.00 58. Part 4: Total financial assets, line 36 \$927.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$10.577.00 Copy personal property total \$10.577.00

Official Form 106A/B Schedule A/B: Property page 5

Total of all property on Schedule A/B. Add line 55 + line 62

\$10,577.00

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Fill in this infor	mation to identify your	case:		
Debtor 1	Charmin G Clare	nce		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA	_
Case number				

Official Form 106C

(if known)

Schedule C: The Property You Claim as Exempt

4/16

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2. Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming	Check one only	even if your	spouse is filin	g with _.	you.
----	--	----------------	--------------	-----------------	---------------------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemptio
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2013 Buick Verano 94100 miles Line from Schedule A/B: 3.1	\$8,000.00		\$1.00	Va. Code Ann. § 34-26(8)
			100% of fair market value, up to any applicable statutory limit	
household furnishings	\$1,000.00		\$1,000.00	Va. Code Ann. § 34-26(4a)
Ellie Holli Govedale 70 B. 411			100% of fair market value, up to any applicable statutory limit	
2 televisions \$200; 1 cell phone \$100; tablet \$50	\$350.00		\$350.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
wearing apparel Line from Schedule A/B: 11.1	\$300.00		\$300.00	Va. Code Ann. § 34-26(4)
Ellie II on Goredale 70 B. TTT			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$50.00	•	\$50.00	Va. Code Ann. § 34-4
Ello II oli Golloddio 77 B. 1911			100% of fair market value, up to any applicable statutory limit	

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Debto	Charmin G Clarence			Case number (if known)	
	rief description of the property and line on chedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Un	hecking: Henrico Federal Credit nion, Richmond, VA	\$21.00		\$21.00	Va. Code Ann. § 34-4
	ne from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
•	aycard: Skylight paycard ne from Schedule A/B: 17.2	\$4.00		\$4.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	01(k): BKD Employee Retirement avings	\$850.00		\$850.00	Va. Code Ann. § 34-34
	ne from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
_	ederal: income tax refund	\$1.00		\$1.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	irginia: income tax refund	\$1.00		\$1.00	Va. Code Ann. § 34-4
	The Hoth Generalic PAB. 2012			100% of fair market value, up to any applicable statutory limit	
	re you claiming a homestead exemption Subject to adjustment on 4/01/19 and every			led on or after the date of adjustmer	nt.)
	No				
	Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?

Yes

		Document	Page 18 of 57	10/16/18 11:22AN
Fill in this infor	mation to identify your	case:		
Debtor 1	Charmin G Clare	nce		
	First Name	Middle Name	Last Name	_
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	_
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA	
Case number				

Official Form 106D

(if known)

Schedule D: Creditors Who Have Claims Secured by Property

12/15

☐ Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below.

Part	1: List All Secured Claims				
for e	ach claim. If more than one creditor has	more than one secured claim, list the creditor separately s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1	Carmax	Describe the property that secures the claim:	\$14,615.00	\$8,000.00	\$6,615.00
	Creditor's Name	2013 Buick Verano 94100 miles			
	12800 Tuckahoe Creek Pkwy Henrico, VA 23238	As of the date you file, the claim is: Check all that apply. Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	Debtor 1 only Debtor 2 only	☐ An agreement you made (such as mortgage or secucar loan)	ured		
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
ПА	at least one of the debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claim relates to a	Other (including a right to offset) Purchase M	loney Security		

\$14,615.00 Add the dollar value of your entries in Column A on this page. Write that number here: If this is the last page of your form, add the dollar value totals from all pages. \$14,615.00 Write that number here:

Last 4 digits of account number

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

community debt

Date debt was incurred 3/2016

	Case 1	.8-35197-KRH		Filed 1 Docume	.0/16/18 ent Pa		tered 10 9 of 57	0/16	/18 17:	41:13	Desc Main 10/16/18 11:22
Fill in	this informa	tion to identify your		2 0001110		igo ±	0101				
Debto	or 1	Charmin G Clarei	nce								
		First Name	Middle N	lame	Las	t Name					
Debto (Spouse	or 2 e if, filing)	First Name	Middle N	lame	Las	t Name					
United	d States Bank	ruptcy Court for the:	EASTERN	DISTRICT C	OF VIRGINIA						
Case	number										
(if know				_ 							Check if this is an amended filing
	ial Form										
Sch	edule E/F	F: Creditors W	/ho Have	Unsecu	ured Cla	ims					12/15
Part 1	List All	er (if known). of Your PRIORITY Ur have priority unsecure	secured Clai	ims	•						dditional pages, write your
		of Your NONPRIORIT	Y Unsecured	d Claims							
3. Do	o any creditors	have nonpriority unse	cured claims a	gainst you?							
	No. You have	nothing to report in this p	art. Submit this	form to the co	ourt with your o	other scho	edules.				
	Yes.										
un tha	secured claim,		y for each claim	. For each clai	im listed, iden	tify what t	type of claim	n it is. D	o not list cla	aims already	than one nonpriority included in Part 1. If more the Continuation Page of
											Total claim
4.1	AmeriCre	dit		Last 4 digits	s of account	number					\$4,000.00
	801 Cheri	ry Street, Ste 3500 h, TX 76102		When was t	the debt incu	rred?	2010		_		
		et City State Zlp Code		As of the da	ate you file, th	ne claim	is: Check al	ll that ap	ply		
	Who incurre	ed the debt? Check one.									
	Debtor 1	only		☐ Continge	ent						
	Debtor 2	only		☐ Unliquida	ated						
	Debtor 1	and Debtor 2 only		☐ Disputed	l						
	_	•			NDDIODITY		al aladas.				

Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify repossession ☐ Yes

Official Form 106 E/F

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Debto	or 1 Charmin G Clarence	Case number (if known)					
4.2	Bank of America	Last 4 digits of account number	\$776.00				
	Nonpriority Creditor's Name PO Box 982238 EI Paso, TX 79998	When was the debt incurred? 2017					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	□ Yes	Other. Specify credit card / overdrawn acct					
4.3	Bon Secours Hospital (St. Mary Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00				
	5801 Bremo Road Richmond, VA 23226	When was the debt incurred? 2016-2018					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify open					
4.4	Bon Secours Medical Physicians Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00				
	5801 Bremo Road Richmond, VA 23226	When was the debt incurred? 16-18					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify open-hospital ER visits					

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4.5	Capital One Bank	Last 4 digits of account number	\$736.00
	Nonpriority Creditor's Name P. O. Box 30281 Salt Lake City, UT 84130	When was the debt incurred? 2016/2017	·
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify credit card	
4.6	CBE Group	Last 4 digits of account number	\$162.00
	Nonpriority Creditor's Name PO Box 126	When was the debt incurred? 2017	
	Waterloo, IA 50704 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify open - Dominion Energy	
4.7	Central Furniture	Last 4 digits of account number	\$1.00
	Nonpriority Creditor's Name 3807 Mechanicsville Turnpike	When was the debt incurred? 7/16	
	Richmond, VA 23223 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify returned furniture	

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Debto	or 1 Charmin G Clarence	Case number (if known)	
4.8	Commonwealth Radiology PC	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name 5801 Bremo Road Richmond, VA 23226	When was the debt incurred? 2/18	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify open	
4.9	Convergent Outsourcing, Inc.	Last 4 digits of account number 4363	\$2,521.00
	Nonpriority Creditor's Name 800 SW 39th Street Renton, WA 98057	When was the debt incurred? 2017	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify open - T-Mobile USA	
4.1	Dept of Ed / Nelnet	Last 4 digits of account number	\$3,639.00
	Nonpriority Creditor's Name 121 S 13th Street	When was the debt incurred? 1990	·
	Lincoln, NE 68508 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	_	☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	☐ Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	Other. Specify	
	55	school loans	

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Dr. Amy Miller	Last 4 digits of account number	\$80
Nonpriority Creditor's Name 425 N. Boulevard Richmond, VA 23220	When was the debt incurred? 2016/2017	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify open	
Dr. Karen Royal Love	Last 4 digits of account number	\$20
Nonpriority Creditor's Name 10120 W. Broad St. R	When was the debt incurred? 2014-2015	
Glen Allen, VA 23060 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The or and gate ine, and oranic in oriona an unit apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	□ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
s the claim subject to offset?	report as priority claims	
No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify open	
Focused Recovery Solutions	Last 4 digits of account number	\$39
Nonpriority Creditor's Name 9701 Metropolitan Court, #B North Chesterfield, VA 23236	When was the debt incurred? 10/14	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other. Specify open	

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Debtor	1 Charmin G Clarence	Case number (if known)	
4.1	GE Core Credit Sychrony	Last 4 digits of account number	\$1,500.00
	Nonpriority Creditor's Name PO Box 960061	When was the debt incurred? 5/06	
	Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify open	
4.1	HCA Hospital	Last 4 digits of account number	\$621.00
	Nonpriority Creditor's Name PO Box 13343 Richmond, VA 23225	When was the debt incurred? 8/18	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify open	
4.1	HCA Physicians	Last 4 digits of account number	\$900.00
	Nonpriority Creditor's Name 2621 Grove Avenue Richmond, VA 23220	When was the debt incurred? 8/18	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify open	

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1 Charmin G Clarence	Case number (if known)	
Kohls/Capone	Last 4 digits of account number XXXX	\$587.00
Nonpriority Creditor's Name PO Box 3115	When was the debt incurred? 3/15	
Milwaukee, WI 53201 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	As of the date you me, the dain is. Oneon all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify open	
LabCorp	Last 4 digits of account number	\$200.00
Nonpriority Creditor's Name		
PO Box 2240 Burlington, NC 27216	When was the debt incurred?	
Number Street City State ZIp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	Student loans	
debt s the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	□ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify open	
Macy's/DSNB	Last 4 digits of account number XXXX	\$1,436.00
Nonpriority Creditor's Name	Last 4 digits of account number XXXX	φ1,430.00
P. O. Box 8218 Mason, OH 45040	When was the debt incurred? 7/14	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	Student loans	
ls the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify open	

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Case number (if known)

Minute Clinic Nonpriority Creditor's Name	Last 4 digits of account number	\$200
5001 West Broad Street Richmond, VA 23230	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, , ,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify open	
Online Collections	Last 4 digits of account number 4357	\$815
Nonpriority Creditor's Name	When we the debt incorred 2 2046	
PO Box 1489 Winterville, NC 28559	When was the debt incurred? 2016	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
— No □ Yes	Other. Specify Other. Specif	
	— Other. Specify	
Professional Debt Nonpriority Creditor's Name	Last 4 digits of account number	\$4,075
4161 Carmichael Ave, Ste 156 Jacksonville, FL 32207	When was the debt incurred? 2017	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	past due rent - 11 North at White Oka - Other. Specify formerly Seven Gables	

Case 18-35197-KRH Doc 1 Filed 10/16/18 Entered 10/16/18 17:41:13 Page 27 of 57 10/16/18 11:22AM Document Debtor 1 Charmin G Clarence Case number (if known) 4.2 Radiology Associates Richmond \$100.00 Last 4 digits of account number 3 Nonpriority Creditor's Name P. O. Box 13343 8/18 When was the debt incurred? Richmond, VA 23225 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify open 4.2 Receivables Management Sys **XXXX** \$262.00 Last 4 digits of account number Nonpriority Creditor's Name 7206 Hull Street Road, #211 When was the debt incurred? 7/14 Richmond, VA 23235 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ Other. Specify open - Patient First ☐ Yes Regional Acceptance Corp \$5.792.00 **XXXX** Last 4 digits of account number Nonpriority Creditor's Name 1424E East Fire Tower Road When was the debt incurred? 2014 Greenville, NC 27858 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify repossession deficiency ☐ Yes

 \square Debts to pension or profit-sharing plans, and other similar debts

■ No

4.2

5

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Case number (if known)

Last 4 digits of account number	\$1,5
When was the debt incurred? 8/16	
As of the date you file, the claim is: Check all that apply	
□ Occasion cont	
•	
Student loans	
Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
<u></u>	
_ Guidi. Gpoonly	
Last 4 digits of account number 4958	\$2
When was the debt incurred? 1/17	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
Obligations arising out of a separation agreement or divorce that you did not	
<u></u>	
Other. Specify Open - Comcast	
Last 4 digits of account number XXXX	\$2
When was the debt incurred? 11/14	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans	
Obligations arising out of a separation agreement or divorce that you did not	
<u> </u>	
- Debte to periord of profit-straining plants, and other similar debte	
	When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Personal loan Last 4 digits of account number Other. Specify Personal loan Last 4 digits of account number Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Other. Specify Open - Comcast Last 4 digits of account number Type of Noner arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Open - Comcast Last 4 digits of account number Contingent Unliquidated Disputed Type of Noner arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Open - Comcast Last 4 digits of account number XXXX When was the debt incurred? Unliquidated Disputed Type of Noner Rorrity unsecured claim: Unliquidated Disputed Type of Noner Rorrity unsecured claim: Student loans

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

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Debtor 1 Charmin G Clarence

Case number (if known)

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 3,639.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 31,957.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 35,596.00

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		Docume	III Paye 30 01 37		10/10/10 11:22/1
Fill in this infor	mation to identify your	case:			
Debtor 1	Charmin G Clare	nce			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF VIRGINIA		
Case number					
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	_

		Documer	nt Page 31 o	<u>f 57 </u>	10/16/18 11:22A
Fill in this	information to identify your	case:			
Debtor 1	Charmin G Clarer				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Case numb (if known)	per			С	☐ Check if this is an amended filing
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
ill it out, ar our name		boxes on the left. Attach . Answer every question.	the Additional Page to	on. If more space is needed, on this page. On the top of any as a codebtor.	
■ Na					
■ No □ Yes					
Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. Did your spouse, former spouse.	Nevada, New Mexico, Pue	rto Rico, Texas, Washi	y? (Community property states angton, and Wisconsin.)	and territories include
in line Form 1	2 again as a codebtor only i	f that person is a guarant	or or cosigner. Make s	if your spouse is filing with yo sure you have listed the credit 6G). Use Schedule D, Schedul	tor on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	P Code		Column 2: The creditor to Check all schedules that ap	
3.1				Schedule D, line	
1	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
1	Name			☐ Schedule E/F, line ☐ Schedule G, line ☐	
-	Number Street			_	

State

City

ZIP Code

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Fill	in this information to identify your c	ase:							
Del	btor 1 Charmin G (Clarence			_				
	btor 2 puse, if filing)				_				
Uni	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF VIRGINIA		_				
	se number nown)		-			Check if this is: An amende A supplement	d filing ent showing		
\bigcirc	fficial Form 106I							llowing date:	
	chedule I: Your Inc	omo				MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as possiblying correct information. If you use. If you are separated and you ch a separate sheet to this form. The complex to the	are married and not filing wi	ng jointly, and your sith you, do not include	spouse i de infori	s living nation a	with you, incluion incluion incluion.	ude inform ouse. If mo	nation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ing spouse	
	If you have more than one job,	Empleyment status	■ Employed			☐ Emplo	☐ Employed		
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed					
	employers.	Occupation	nurse						
	Include part-time, seasonal, or self-employed work.	Employer's name	BKD Twenty On Comp	e Mana	gemen	t 			
	Occupation may include student or homemaker, if it applies.	Employer's address	6737 W Washington St #2300 Milwaukee, WI 53214						
		How long employed to	here? 18 mon	ths					
Par	rt 2: Give Details About Mor	nthly Income							
spoi If yo	imate monthly income as of the duse unless you are separated. but or your non-filing spouse have more space, attach a separate sheet to	ore than one employer, co	,	•	, ,			,	J
					Fo	r Debtor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	2,009.09	\$	N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	2,009.09	\$	N/A_	
							-		

Official Form 106I Schedule I: Your Income page 1

Debtor 1		Charmin G Clarence			Case number (if known)						
					For	Debtor 1			or Debtor on-filing s		
	Cop	by line 4 here	4.		\$	2,009	9.09	\$		N/A	<u> </u>
5.	l ist	all payroll deductions:									
J.	5a.	Tax, Medicare, and Social Security deductions	58	2	\$	210	9.72	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5k		\$ -		0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$-		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$		0.00	\$		N/A	_
	5e.	Insurance	56		\$_		0.00	\$		N/A	_
	5f.	Domestic support obligations	5f	f.	\$		0.00	\$		N/A	_
	5g.	Union dues	50	g.	\$		0.00	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	h.+	\$_	(0.00	+ \$		N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	219	9.72	\$		N/A	<u>. </u>
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	1,789	9.37	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88		\$_		0.00	\$		N/A	_
	8b.	Interest and dividends	8k	٥.	\$_		0.00	\$		N/A	<u> </u>
	8c. 8d.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation	80		\$_ \$		0.00 0.00	\$		N/A N/A	
	8e.	Social Security	86		\$ -		0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f	f.	\$_	(0.00	\$		N/A	<u> </u>
	8g.	Pension or retirement income	80		\$_		0.00	\$		N/A	_
	8h.	Other monthly income. Specify: parttime employment	_ 8r	h.+	\$_	1,10	4.00	+ \$		N/A	<u>.</u>
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	1,10	4.00	\$		N/A	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		2,893.37	+ \$		N/A	= \$	2,893.37
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		2,093.37			IV/A		2,093.31
11.	Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:	dep					•	n Schedule	∍ J. +\$	0.00
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certain lies								\$	2,893.37
13.	Do :	you expect an increase or decrease within the year after you file this form	?							Combi month	ned ly income
		No.									

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	in thin inform	tion to identify	oc.			l					
		ation to identify yo				0'	al if this is				
Debi	tor 1	Charmin G Clarence				Check if this is: ☐ An amended filing					
Debt	tor 2						ŭ	wing postpetition chapter			
	ouse, if filing)				_		13 expenses as of				
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA						MM / DD / YYYY					
Case	e number										
(If kr	nown)										
Of	ficial Fo	rm 106J									
		J: Your I	Evnor	1606				12/15			
				ISCS If two married people	are filing together, bo	oth are equ	ually responsible fo				
info	rmation. If m		eded, atta	ch another sheet to thi							
Part	t 1: Descr	ibe Your House	hold								
1.	Is this a joir	nt case?									
	■ No. Go to	line 2.									
	☐ Yes. Doe	es Debtor 2 live i	in a separ	ate household?							
	□N	-									
	ПΥ	es. Debtor 2 mus	st file Offic	ial Form 106J-2, <i>Expens</i>	es for Separate House	ehold of Del	btor 2.				
2.	Do you have	e dependents?	□ No								
	Do not list Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?			
	Do not state	the						□ No			
	dependents				daughter		18	■ Yes			
								□ No			
					daughter		20	Yes			
								□ No			
								☐ Yes			
								□ No			
3.	Do vour ext	oenses include	_	l NI-				☐ Yes			
٥.	expenses of	f people other tl		No Yes							
	yoursell and	d your depende	nts? —								
		ate Your Ongoi									
exp				uptcy filing date unless by is filed. If this is a su				apter 13 case to report of the form and fill in the			
Incl	ude expense	s paid for with r	non-cash	government assistance	e if you know						
the	value of sucl	h assistance and		cluded it on Schedule I			Vaurava				
(Off	icial Form 10)6I.)					Your exp	enses			
4.		or home owners		nses for your residence or lot.	. Include first mortgage	e 4.	\$	700.00			
	If not includ	led in line 4:									
	4a. Real e	estate taxes				4a.	\$	0.00			
		rty, homeowner's	s, or renter	's insurance		4b.	:	0.00			
				upkeep expenses		4c.	:	0.00			
_		owner's associat			hama and the fe	4d.	·	0.00			
5.	Additional r	nortgage payme	ents for v	our residence. such as l	nome equity loans	5.	ው	0.00			

Debtor 1	Charmin G Clarence	Case num	nber (if known)	
6. Utili	ties:			
6a.	Electricity, heat, natural gas	6a.	\$	0.00
6b.	Water, sewer, garbage collection	6b.	\$	0.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.		100.00
6d.	Other. Specify:	6d.	· · · · · · · · · · · · · · · · · · ·	0.00
	d and housekeeping supplies	— 7.	·	500.00
	dcare and children's education costs	8.	\$	100.00
	hing, laundry, and dry cleaning	9.	\$	200.00
	sonal care products and services	10.		36.00
	lical and dental expenses	11.		80.00
	nsportation. Include gas, maintenance, bus or train fare.		<u> </u>	00.00
	not include car payments.	12.	\$	300.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
4. Cha	ritable contributions and religious donations	14.	\$	0.00
5. Ins u	rance.			
Do r	not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a.	\$	0.00
15b.	Health insurance	15b.	\$	200.00
	Vehicle insurance	15c.	\$	206.00
15d.	Other insurance. Specify:	15d.	\$	0.00
6. Tax	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Spe	·	16.	\$	0.00
	allment or lease payments:			
	Car payments for Vehicle 1	17a.	·	375.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	r payments of alimony, maintenance, and support that you did not report as	10	c	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		
	er payments you make to support others who do not live with you.	40	\$	0.00
Spe	·	19.	our Incomo	
	er real property expenses not included in lines 4 or 5 of this form or on Scheo Mortgages on other property	20a.		0.00
	Real estate taxes	20a.	·	0.00
	Property, homeowner's, or renter's insurance	20b. 20c.	· .	0.00
	Maintenance, repair, and upkeep expenses	20d.	·	
	Homeowner's association or condominium dues		·	0.00
		20e.	·	0.00
. Oth	er: Specify: storage unit		+\$	127.00
2. Calc	culate your monthly expenses			
22a.	Add lines 4 through 21.		\$	2,974.00
22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,974.00
			,	
	culate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	· <u> </u>	2,893.37
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,974.00
60	Outlined and a second s			
23c.	Subtract your monthly expenses from your monthly income.	23c.	\$	-80.63
	The result is your monthly net income.	200.	Ť	00.00
For e modi	you expect an increase or decrease in your expenses within the year after you example, do you expect to finish paying for your car loan within the year or do you expect your fication to the terms of your mortgage?			or decrease because of a
\Box	You Explain here:			

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Fill in this informa	ation to identify your	case:			
Debtor 1	Charmin G Clarer	nce			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bank	cruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Case number(if known)					☐ Check if this is an amended filing
Official Form Declaration		ın Individual I	Debtor's Scl	hedules	12/15
f two married peo	ple are filing togethe	r, both are equally respons	sible for supplying corre	ect information.	
obtaining money o	or property by fraud in U.S.C. §§ 152, 1341, 1	n connection with a bankr		Making a false statement, n fines up to \$250,000, or in	
Did you pay o	or agree to pay some	one who is NOT an attorn	ey to help you fill out ba	ankruptcy forms?	
■ No □ Yes. Na	me of person				Petition Preparer's Notice, Signature (Official Form 119)
	of perjury, I declare rue and correct.	that I have read the summ	ary and schedules filed	I with this declaration and	
X /s/ Charr	min G Clarence		X		
• • • • • • • • • • • • • • • • • • • •	G Clarence of Debtor 1		Signature of D	Debtor 2	
Date O c	tober 15, 2018		Date		

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Debtor 1	Charmin G Clare	ence			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Office Of	ates baritraptey ocurt for the.		· · · · · · · · · · · · · · · · · · ·		
Case nun	nber			_	Check if this is an amended filing
	al Form 107 ment of Financial	Affairs for Individ	duals Filing for B	ankruptcy	4/1
information	mplete and accurate as possion. If more space is needed, if known). Answer every que	attach a separate sheet to			
Part 1:	Give Details About Your Ma	arital Status and Where You	Lived Before		
1. What	t is your current marital statu	ıs?			
	Married				
	Not married				
2. Durir	ng the last 3 years, have you	lived anywhere other than	where you live now?		
	No				
_	Yes. List all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	<i>1</i> .	
Deb	tor 1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there
_	5 Tivoli Circle #103 hmond, VA 23227	From-To: 2011 - 1/2017	☐ Same as Debtor	1	☐ Same as Debtor 1 From-To:
states and	in the last 8 years, did you end territories include Arizona, Ca No Yes. Make sure you fill out Scl Explain the Sources of You	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R		
Fill in	you have any income from er the total amount of income you are filing a joint case and you	u received from all jobs and a	all businesses, including part	-time activities.	endar years?
_	No				
	Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	nuary 1 of current year until you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$22,988.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		Operating a business	

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Page 38 of 57 Document Debtor 1 Charmin G Clarence Case number (if known) Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$31,323.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$43,117.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** (before deductions Describe below. each source Describe below. (before deductions and and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an ☐ No. individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? ■ No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Total amount

paid

Amount vou

still owe

Creditor's Name and Address

attorney for this bankruptcy case.

Dates of payment

Was this payment for ...

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Case number (if known)

7.	Within 1 year before you filed for bankrupt <i>Insiders</i> include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. A alimony.	artners; relatives of any gene a control, or owner of 20% or	eral partners; partner more of their voting	erships of which you g securities; and an	u are a genera ly managing ag	I partner; corporations gent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos		ments or transfer a	ny property on ac	count of a de	ebt that benefited an
	No					
	Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Passan for t	this normant
	insider 5 Name and Address	Dates of payment	paid	Amount you still owe	Include credi	this payment tor's name
Par	t 4: Identify Legal Actions, Repossessio	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	RFI Seven Gables LLC v. Charmin G Clarence	unlawful detainer	Henrico General District Court 4301 Easr Parham Road Henrico, VA 23273		☐ Pending ☐ On appea ☐ Conclude	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached	, seized, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off at accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. 				, set off any a	mounts from your	
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a No Yes		rty in the possessi	on of an assignee	e for the bene	fit of creditors, a

Debtor 1 Charmin G Clarence

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Deb	otor 1 Charmin G Clarence	Document	Page 40 of	57 Case number (if	known)	10/16/18 11:22
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	tcy, did you give any	gifts with a total va	alue of more tha	an \$600 per person	?
	Gifts with a total value of more than \$600 per person	Describe the g	ifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift or cont		gifts or contributio	ons with a total	value of more than	\$600 to any charity?
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)		you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankruptor gambling? No Yes. Fill in the details.	cy or since you filed fo	or bankruptcy, did	you lose anyth	ing because of the	ft, fire, other disaster
	Describe the property you lost and how the loss occurred	escribe any insurance clude the amount that i surance claims on line	nsurance has paid.	List pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers					
16.	consulted about seeking bankruptcy or pre Include any attorneys, bankruptcy petition prep	paring a bankruptcy	petition?			erty to anyone you
	☐ No☐ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	transferred	d value of any proլ	perty	Date payment or transfer was made	Amount of payment
	Michael A. Riedel 208 1/2 North 23rd Street Richmond, VA 23223		e and \$335 filing	fee	\$300 April 2018; \$500 June 2018; \$435 September 2018	\$1,235.00
17.	Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you	ors or to make payme			transfer any prope	erty to anyone who

☐ Yes. Fill in the details.

Person Who Was Paid Description and value of any property Address transferred made

Date payment or transfer was Amount of payment Debtor 1 Charmin G Clarence

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busin Include both outright transfers and transfers made include gifts and transfers that you have already list No Yes. Fill in the details.	ness or financial affai as security (such as th	irs?					
	Person Who Received Transfer Address	Description and va		payme	ibe any property or ents received or debts n exchange	Date transfer was made		
	Person's relationship to you							
19.	beneficiary? (These are often called asset-protection No	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No						
	Yes. Fill in the details.							
	Name of trust	Description and va	alue of the pro	perty trans	ferred	Date Transfer was made		
Par	t 8: List of Certain Financial Accounts, Instru	ıments. Safe Deposit	Boxes, and St	orage Unit	s			
		•		_		banafit alaaad		
20.	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred?	•				,		
	Include checking, savings, money market, or or houses, pension funds, cooperatives, associat No				; shares in banks, credit	unions, brokerage		
	Yes. Fill in the details.		_ ,		D			
		est 4 digits of ecount number	Type of accordinstrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year cash, or other valuables? No	r before you filed for	bankruptcy, a	ny safe dep	osit box or other deposi	tory for securities,		
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, Str State and ZIP Code)		Describe	the contents	Do you still have it?		
22.	Have you stored property in a storage unit or p	lace other than your	home within 1	year befor	e you filed for bankruptc	y?		
	No							
	Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, State and ZIP Code)			the contents	Do you still have it?		
	Life Storage 1210 Bentley Street Richmond, VA 23227	myself		miscella wearing	neous furniture 7 apparel	□ No ■ Yes		
Par	t 9: Identify Property You Hold or Control for	Someone Else						
23.	Do you hold or control any property that some for someone.	one else owns? Inclu	de any proper	ty you borr	owed from, are storing fo	or, or hold in trust		
	■ No							
	☐ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prope (Number, Street, City, Str Code)		Describe	the property	Value		

Debtor 1 Charmin G Clarence

Case number (if known)

Pa	rt 10: Give Details About Environmental Informa	ation					
For	the purpose of Part 10, the following definitions	apply:					
•	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances any location, facility, or property as	r, land, soil, surface water, ground ostances, wastes, or material.	water, or other	r medium, including sta	atutes or		
	to own, operate, or utilize it, including disposal		an, milomon y	sa non own, operate, e			
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.						
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred	J.			
24.	Has any governmental unit notified you that you ■ No □ Yes. Fill in the details.	ı may be liable or potentially liable	under or in vic	olation of an environme	ental law?		
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environme know it	ental law, if you	Date of notice		
25.	Have you notified any governmental unit of any release of hazardous material? No Yes, Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environme know it	ental law, if you	Date of notice		
26.	Have you been a party in any judicial or adminis ■ No □ Yes. Fill in the details.	strative proceeding under any envi	onmental law'	? Include settlements a	nd orders.		
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	case	Status of the case		
Pa	tt 11: Give Details About Your Business or Con	nections to Any Business					
27.	Within 4 years before you filed for bankruptcy, o	lid you own a business or have an	of the followi	ing connections to any	business?		

Wit	hin 4 years before you filed for bankrup	tcy, did you own a business or have any o	t the following connections to any business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)						
	☐ A partner in a partnership						
	☐ An officer, director, or managing ex	ecutive of a corporation					
	☐ An owner of at least 5% of the votin	g or equity securities of a corporation					
	No. None of the above applies. Go to	Part 12.					
	Yes. Check all that apply above and fil	in the details below for each business.					
Ad	siness Name dress mber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed				

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☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify your	case:				
Debtor 1	Charmin G Clarer	nce				
	First Name	Middle Name		Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name		Last Name		
	nkruptcy Court for the:	EASTERN DISTR	ICT OF VIR			
Officed States Dai	inkruptcy Court for the.	<u> </u>	101 01 111	Olivia		
Case number						☐ Check if this is an amended filing
				s Filing Under Chap	oter '	7 12/15
	claims secured by yo		out tills lo	····· ···		
you have least You must file this	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has no ithin 30 days after	you file yoι	or bankruptcy petition or by the dat ause. You must also send copies to		
	ople are filing together d date the form.	r in a joint case, bo	th are equa	lly responsible for supplying corre	ct infor	mation. Both debtors must
	and accurate as possib our name and case nur		needed, at	tach a separate sheet to this form.	On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Have	e Secured Claims				
1. For any creditor	-	art 1 of Schedule D	: Creditors	Who Have Claims Secured by Prop	erty (Of	ficial Form 106D), fill in the
	editor and the property t	hat is collateral	What do secures	you intend to do with the property a debt?	that	Did you claim the property as exempt on Schedule C?
Creditor's C	armax			der the property. In the property and redeem it.		□ No
·	2013 Buick Verand	94100 miles	Reaff	the property and enter into a irmation Agreement.		■ Yes
property securing debt:			☐ Retain	the property and [explain]:		
Part 2: List Yo	our Unexpired Persona	I Property I eases				
For any unexpire in the information	d personal property le n below. Do not list rea	ase that you listed Il estate leases. Un	expired lea	e G: Executory Contracts and Unex ses are leases that are still in effect does not assume it. 11 U.S.C. § 365	t; the le	
Describe your u	nexpired personal pro	perty leases			Wi	II the lease be assumed?
l cocculo nomo:					_	
Lessor's name: Description of lea	sed				Ц	No
Property:						Yes
Lessor's name:						No
Description of lea Property:	sed					Yes
Lessor's name:						No
Official Form 108		Statement of In	tention for	Individuals Filing Under Chapter 7		page

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Debt	or 1	Charmin G Clarence	Case number (if known)
Desc Prop		n of leased	☐ Yes
		ame: n of leased	□ No □ Yes
		ame: n of leased	□ No □ Yes
		ame: n of leased	□ No □ Yes
		ame: n of leased	□ No □ Yes
orope	r pena	at is subject to an unexpired lease.	d my intention about any property of my estate that secures a debt and any personal
-	Char	harmin G Clarence min G Clarence ture of Debtor 1	XSignature of Debtor 2
	Date	October 15, 2018	Date

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United States Bankruptcy Court Eastern District of Virginia

In re	Charmin G Clarence		Case No.	
		Debtor(s)	Chapter	7
	DISCLOSURE OF COMPE	NSATION OF ATT	ORNEY FOR D	EBTOR
co				
co	ursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule ompensation paid to me, for services rendered or to be unkruptcy case is as follows:	* **	•	* /
co ba	empensation paid to me, for services rendered or to be	* **	•	* /
co ba H	ompensation paid to me, for services rendered or to be unkruptcy case is as follows:	* **	•	ation of or in connection with

- - Debtor \square Other (specify)
- The source of compensation to be paid to me is:
 - Debtor \square Other (specify)
- 4. ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
 - ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
- In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - d. Other provisions as needed:

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

Representation of the debtors in any dischargeability actions, preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens; judicial lien avoidances, relief from stay actions or any other adversary proceeding.

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CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 15, 2018	/s/ Michael A. Riedel
Date	Michael A. Riedel
	Signature of Attorney
	Michael A. Riedel, Attorney at Law
	Name of Law Firm
	208 1/2 North 23rd Street
	Richmond, VA 23223
	804-343-1112 Fax: 804-343-1139

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,223 (For all Cases Filed on or after 01/01/2018)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

P	PROOF OF SERVICE
,	the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, (C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class Signature of Attorney

Fill i	in this information to identify your case:				directed in this form and	in Form
Deb	otor 1 Charmin G Clarence		122	A-1Supp:		
	otor 2 use, if filing)			■ 1. There is no pre	sumption of abuse	
Unit	ted States Bankruptcy Court for the: Eastern District	of Virginia	. [applies will be	to determine if a presun made under <i>Chapter 7 I</i> fficial Form 122A-2).	
(if kno			· c		st does not apply now be ry service but it could ap	
				☐ Check if this is	an amended filing	•
Off	ficial Form 122A - 1				3	
	apter 7 Statement of Your Cu	urrent Month	ly Inc	ome		12/1
attacl case	s complete and accurate as possible. If two married people has eparate sheet to this form. Include the line number to number (if known). If you believe that you are exempted figuring military service, complete and file Statement of Exempted 1: Calculate Your Current Monthly Income	o which the additional in from a presumption of ab	formation ap	oplies. On the top of a se you do not have pr	any additional pages, write imarily consumer debts of	e your name and r because of
1.	What is your marital and filing status? Check one	only.				
	■ Not married. Fill out Column A, lines 2-11.	,.				
	☐ Married and your spouse is filing with you. Fill	Lout both Columns A ar	nd B. lines 2	P-11.		
	☐ Married and your spouse is NOT filing with yo		,			
	☐ Living in the same household and are not le			umns A and B. lines	2-11.	
	☐ Living separately or are legally separated. F penalty of perjury that you and your spouse are living apart for reasons that do not include eva	Fill out Column A, lines 2 re legally separated und	2-11; do not ler nonbank	fill out Column B. B	By checking this box, you lies or that you and your	
10 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6 are 6 months, add the income for all 6 months and divide the topouses own the same rental property, put the income from that	6-month period would be Motal by 6. Fill in the result. D	larch 1 through the larch 1 through	gh August 31. If the an	nount of your monthly incom more than once. For example	e varied during le, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
	Your gross wages, salary, tips, bonuses, overtim payroll deductions).			\$ 3,255.76	\$	
3.	Alimony and maintenance payments. Do not inclu- Column B is filled in.	de payments from a spo	ouse if	\$ 0.00	\$	
4.	All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Include regular contributions from a filled in. Do not include payments you listed on line 3	ort. Include regular cont old, your dependents, p spouse only if Column	tributions parents, B is not	\$ 0.00	\$	
5.						
		Debtor 1	1			
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$ 0.00			•	
	Net monthly income from a business, profession, or t	farm \$0.00 Cor	by here -> S	0.00	\$	
6.	Net income from rental and other real property					

Official Form 122A-1

Debtor 1 0.00

0.00 Copy here -> \$

0.00

0.00

\$

0.00

\$ **-**\$

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

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Case number (if known)

				Column A Debtor 1		Column B Debtor 2 or non-filing s	oouse	
8. Unem	ployment compensation			\$	0.00	\$		
	of enter the amount if you contend that the amour ocial Security Act. Instead, list it here:	nt received was a benef	it under					
For	you	0.	00					
For	your spouse S	S						
	ion or retirement income. Do not include any and it under the Social Security Act.	mount received that wa	s a	\$	0.00	\$		
Do no receiv	ne from all other sources not listed above. Sp t include any benefits received under the Social red as a victim of a war crime, a crime against hu stic terrorism. If necessary, list other sources on below.	Security Act or paymen manity, or international	its or					
	•			\$	0.00	\$		
				\$	0.00	\$		
	Total amounts from separate pages, if any.		+	\$	0.00	\$		
	alate your total current monthly income. Add licolumn. Then add the total for Column A to the to		\$	3,255.76	+ \$		= \$	3,255.76
Part 2:	Determine Whether the Means Test Applies	to You					incom	
12. Calcu	late your current monthly income for the year	r. Follow these steps:						
12a. C	Copy your total current monthly income from line	11		Сор	y line 11 h	nere=>	\$	3,255.76
N	Multiply by 12 (the number of months in a year)						X 1	
12b. T	The result is your annual income for this part of the	ne form				12b.	\$	39,069.12
13. Calcu	late the median family income that applies to	you. Follow these step	os:					
Fill in	the state in which you live.	VA						
Fill in	the number of people in your household.	3						
To find	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.					37,009.00		
14. How 0	do the lines compare?							
14a.	Line 12b is less than or equal to line 13. C Go to Part 3.	On the top of page 1, ch	eck box	1, There is	no presum	ption of abuse	•	
14b.	Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	, The pre	esumption of	abuse is	determined by	Form 12	22A-2.
Part 3:	Sign Below							
E	By signing here, I declare under penalty of perjur	y that the information or	n this sta	atement and	in any atta	achments is tru	e and co	orrect.
X	/s/ Charmin G Clarence				·			
^	Charmin G Clarence Signature of Debtor 1							
Date	October 15, 2018 MM / DD / YYYY							
If	f you checked line 14a, do NOT fill out or file For	m 122A-2.						
If	f you checked line 14b, fill out Form 122A-2 and	file it with this form.						

Charmin G Clarence

Debtor 1

Debtor 1 Charmin G Clarence

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 04/01/2018 to 09/30/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Abby Home Health Care Inc

Income by Month:

6 Months Ago:	04/2018	\$1,224.00
5 Months Ago:	05/2018	\$1,428.00
4 Months Ago:	06/2018	\$1,530.00
3 Months Ago:	07/2018	\$1,122.00
2 Months Ago:	08/2018	\$1,156.00
Last Month:	09/2018	\$1,020.00
	Average per month:	\$1,246.67

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **BKD Twenty One Management Comp**

Income by Month:

6 Months Ago:	04/2018	\$1,911.72
5 Months Ago:	05/2018	\$1,804.90
4 Months Ago:	06/2018	\$2,755.45
3 Months Ago:	07/2018	\$1,775.06
2 Months Ago:	08/2018	\$2,007.84
Last Month:	09/2018	\$1,799.58
	Average per month:	\$2,009.09

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	er 7:	Liquidation	
	\$245	filing fee	
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. AmeriCredit 801 Cherry Street, Ste 3500 Fort Worth, TX 76102

Bank of America PO Box 982238 El Paso, TX 79998

Bon Secours Hospital (St. Mary 5801 Bremo Road Richmond, VA 23226

Bon Secours Medical Physicians 5801 Bremo Road Richmond, VA 23226

Capital One Bank
P. O. Box 30281
Salt Lake City, UT 84130

Carmax 12800 Tuckahoe Creek Pkwy Henrico, VA 23238

CBE Group PO Box 126 Waterloo, IA 50704

Central Furniture 3807 Mechanicsville Turnpike Richmond, VA 23223

Commonwealth Radiology PC 5801 Bremo Road Richmond, VA 23226

Convergent Outsourcing, Inc. 800 SW 39th Street Renton, WA 98057

Dept of Ed / Nelnet 121 S 13th Street Lincoln, NE 68508 Dr. Amy Miller 425 N. Boulevard Richmond, VA 23220

Dr. Karen Royal Love 10120 W. Broad St. R Glen Allen, VA 23060

Focused Recovery Solutions 9701 Metropolitan Court, #B North Chesterfield, VA 23236

GE Core Credit Sychrony PO Box 960061 Orlando, FL 32896

HCA Hospital PO Box 13343 Richmond, VA 23225

HCA Physicians 2621 Grove Avenue Richmond, VA 23220

Kohls/Capone PO Box 3115 Milwaukee, WI 53201

LabCorp PO Box 2240 Burlington, NC 27216

Macy's/DSNB P. O. Box 8218 Mason, OH 45040

Minute Clinic 5001 West Broad Street Richmond, VA 23230

Online Collections PO Box 1489 Winterville, NC 28559 Professional Debt 4161 Carmichael Ave, Ste 156 Jacksonville, FL 32207

Radiology Associates Richmond P. O. Box 13343 Richmond, VA 23225

Receivables Management Sys 7206 Hull Street Road, #211 Richmond, VA 23235

Regional Acceptance Corp 1424E East Fire Tower Road Greenville, NC 27858

Regional Finance 5694 Brook Road Richmond, VA 23227

Southwest Credit 4120 International Pkwy, #1100 Carrollton, TX 75007

Verizon PO Box 650584 Dallas, TX 75265